

Grantee State

In which state is the grantee located? Massachusetts
(for multiple state selections hold CTRL+Key)

Grantee Information

Grantee Name Arlington MA
Name of Organization or Department Administering Funds
Organizational DUNS# 073802126
Grant Number S09-MY-25-0015
Grant Amount \$533,800
Identify the Field Office Boston
Identify CoC(s) in which the grantee and/or subgrantee(s) will provide HPRP assistance. MA-517 - Somerville CoC

HPRP Contact Name

Prefix Ms.
First Name Laura
Middle Name
Last Name Wiener
Suffix
Title Director of Housing

HPRP Contact Address

Street Address 1 730 Massachusetts Avenue
Street Address 2
City Arlington
State Massachusetts
ZIP Code 02476

Phone Number 781-316-3091
Format: 123-456-7890

Extension

Fax Number 781-316-3019
Format: 123-456-7890

Email Address lwiener@town.arlington.ma.us
Confirm Email Address lwiener@town.arlington.ma.us

Report Period and Status

Select the Reporting Period for this Performance Report 07/01/09 - 09/30/09

Indicate Report Type QPR

Indicate Performance Report Status Preliminary

Persons and Households Served

Instructions:

In the first row ("Total Served"), enter the total unduplicated number of persons and households served with HPRP Homelessness Prevention Assistance and HPRP Homeless Assistance (Rapid Re-Housing) in the current quarter and for the grant to date. In the rows under "Total Served by Activity (#)," enter the number of persons and households served with each type of assistance.

Total Served

Homelessness Prevention
Homeless Assistance
TOTAL

Total Served	Pers ons		Hshl ds		Pers ons		Hshl ds		Pers ons		Hshl ds		
	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	
Total Served	0	0	0	0	0	0	0	0	0	0	0	0	

Total Served by Activity (#)

Homelessness Prevention
Homeless Assistance
TOTAL

Activities	Pers ons		Hshl ds		Pers ons		Hshl ds		Pers ons		Hshl ds		
	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	Qua rter	Gra nt to Date	
Financial Assistance													
Rental assistance	0	0	0	0	0	0	0	0	0	0	0	0	
Security and utility deposits	0	0	0	0	0	0	0	0	0	0	0	0	
Utility payments	0	0	0	0	0	0	0	0	0	0	0	0	
Moving cost assistance	0	0	0	0	0	0	0	0	0	0	0	0	
Motel & hotel vouchers	0	0	0	0	0	0	0	0	0	0	0	0	
Total-Financial Assistance	0	0	0	0	0	0	0	0	0	0	0	0	

Financial Assistance													
Rental assistance	0	0	0	0	0	0	0	0	0	0	0	0	
Security and utility deposits	0	0	0	0	0	0	0	0	0	0	0	0	
Utility payments	0	0	0	0	0	0	0	0	0	0	0	0	
Moving cost assistance	0	0	0	0	0	0	0	0	0	0	0	0	
Motel & hotel vouchers	0	0	0	0	0	0	0	0	0	0	0	0	
Total-Financial Assistance	0	0	0	0	0	0	0	0	0	0	0	0	

Housing Relocation & Stabilization Services												
Case management	0	0	0	0	0	0	0	0	0	0	0	0
Outreach and engagement	0	0	0	0	0	0	0	0	0	0	0	0
Housing search and placement	0	0	0	0	0	0	0	0	0	0	0	0
Legal services	0	0	0	0	0	0	0	0	0	0	0	0
Credit repair	0	0	0	0	0	0	0	0	0	0	0	0
Total-Housing Relocation & Stabilization Services	0	0	0	0	0	0	0	0	0	0	0	0

In the cells below, enter the number of persons who resided in each of the destinations provided after HPRP Homelessness Prevention Assistance ended, in the current quarter and the total for the grant to date.

Prevention#160

		Quarter				Grant to Date	
Destination	Persons	%	% of Total	Persons	%	% of Total	
Permanent Destinations							
Permanent supportive housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)	0	0.00%	0.00%	0	0.00%	0.00%	
Rental by client, no housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%	
Rental by client, VASH housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%	
Rental by client, other (non-VASH) housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%	
Owned by client, no housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%	
Owned by client, with housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%	
Staying or living with family, permanent tenure	0	0.00%	0.00%	0	0.00%	0.00%	
Staying or living with friend, permanent tenure	0	0.00%	0.00%	0	0.00%	0.00%	
Total Persons Leaving for Permanent Destinations	0	100.00%	0.00%	0	100.00%	0.00%	
Temporary Destinations							
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0.00%	0.00%	0	0.00%	0.00%	
Transitional housing for homeless persons (including homeless youth)	0	0.00%	0.00%	0	0.00%	0.00%	
Staying or living with family, temporary tenure	0	0.00%	0.00%	0	0.00%	0.00%	
Staying or living with friend, temporary tenure	0	0.00%	0.00%	0	0.00%	0.00%	
Hotel or motel paid for without emergency shelter voucher	0	0.00%	0.00%	0	0.00%	0.00%	
Place not meant for human habitation	0	0.00%	0.00%	0	0.00%	0.00%	
Safe Haven	0	0.00%	0.00%	0	0.00%	0.00%	
Total Persons Leaving for Temporary Destinations	0	100.00%	0.00%	0	100.00%	0.00%	
Institutional Destinations							
HPRP Quarterly Performance Report		Page 6		10/13/2009			

Psychiatric hospital or other psychiatric facility	0	0.00%	0.00%	0	0.00%	0.00%
Substance abuse treatment facility or detox center	0	0.00%	0.00%	0	0.00%	0.00%
Hospital (non-psychiatric)	0	0.00%	0.00%	0	0.00%	0.00%
Jail, prison or juvenile detention facility	0	0.00%	0.00%	0	0.00%	0.00%
Foster care home or foster care group home	0	0.00%	0.00%	0	0.00%	0.00%
Total Persons Leaving for Institutional Destinations	0	100.00%	0.00%	0	100.00%	0.00%
Miscellaneous						
Other Destinations	0	0.00%	0.00%	0	0.00%	0.00%
Deceased	0	0.00%	0.00%	0	0.00%	0.00%
Don't know / refused	0	0.00%	0.00%	0	0.00%	0.00%
Missing this information	0	0.00%	0.00%	0	0.00%	0.00%
Total for Miscellaneous	0	100.00%	0.00%	0	100.00%	0.00%
TOTAL PERSONS WHO LEFT THE PROGRAM	0		0.00%	0		0.00%

Housing Outcomes of Persons Served with Homeless Assistance

In the cells below, enter the number of persons who resided in each of the destinations provided after HPRP Homeless Assistance ended, in the current quarter and the total for the grant to date.

Housing Outcomes (All Leavers Only)

Enter the number of persons who resided in each of the destinations provided after HPRP Homeless Assistance ended, in the current quarter and the total for the grant to date.

Destination	Quarter			Grant to Date		
	Persons	%	% of Total	Persons	%	% of Total
Permanent Destinations						
Permanent supportive housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)	0	0.00%	0.00%	0	0.00%	0.00%
Rental by client, no housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%
Rental by client, VASH housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%
Rental by client, other (non-VASH) housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%
Owned by client, no housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%
Owned by client, with housing subsidy	0	0.00%	0.00%	0	0.00%	0.00%
Staying or living with family, permanent tenure	0	0.00%	0.00%	0	0.00%	0.00%
Staying or living with friend, permanent tenure	0	0.00%	0.00%	0	0.00%	0.00%
Total Persons Leaving for Permanent Destinations	0	100.00%	0.00%	0	100.00%	0.00%
Temporary Destinations						
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0.00%	0.00%	0	0.00%	0.00%
Transitional housing for homeless persons (including homeless youth)	0	0.00%	0.00%	0	0.00%	0.00%
Staying or living with family, temporary tenure	0	0.00%	0.00%	0	0.00%	0.00%
Staying or living with friend, temporary tenure	0	0.00%	0.00%	0	0.00%	0.00%
Hotel or motel paid for without emergency shelter voucher	0	0.00%	0.00%	0	0.00%	0.00%
Place not meant for human habitation	0	0.00%	0.00%	0	0.00%	0.00%
Safe Haven	0	0.00%	0.00%	0	0.00%	0.00%
Total Persons Leaving for Temporary Destinations	0	100.00%	0.00%	0	100.00%	0.00%
Institutional Destinations						
Psychiatric hospital or other psychiatric facility	0	0.00%	0.00%	0	0.00%	0.00%

Substance abuse treatment facility or detox center	0	0.00%	0.00%	0	0.00%	0.00%
Hospital (non-psychiatric)	0	0.00%	0.00%	0	0.00%	0.00%
Jail, prison or juvenile detention facility	0	0.00%	0.00%	0	0.00%	0.00%
Foster care home or foster care group home	0	0.00%	0.00%	0	0.00%	0.00%
Total Persons Leaving for Institutional Destinations	0	100.00%	0.00%	0	100.00%	0.00%
Miscellaneous						
Other Destinations	0	0.00%	0.00%	0	0.00%	0.00%
Deceased	0	0.00%	0.00%	0	0.00%	0.00%
Don't know / refused	0	0.00%	0.00%	0	0.00%	0.00%
Missing this information	0	0.00%	0.00%	0	0.00%	0.00%
Total for Miscellaneous	0	100.00%	0.00%	0	100.00%	0.00%
TOTAL PERSONS WHO LEFT THE PROGRAM	0		0.00%	0		0.00%

Expenditures by Activity

In the cells below, enter the amount of funds expended (costs incurred, not necessarily drawn down) for each activity type, in the current quarter and for the grant to date.

Expenditures (\$)

Financial Assistance
Housing Relocation & Stabilization Services
Data Collection & Evaluation
Administration
TOTAL

Activities	Quarter	Grant to Date	Quarter	Grant to Date	Quarter	Grant to Date
Financial Assistance	0	0	0	0	0	0
Housing Relocation & Stabilization Services	0	0	0	0	0	0
Data Collection & Evaluation					0	0
Administration					0	0
TOTAL					0	0

Grant Allocation

Did the grantee meet the 9/30 deadline to award or enter into legally binding agreements with subgrantees? Yes

Grantee and Subgrantee/Contractor Allocations

Activity	Amount of HPRP Funds Retained by Grantee	Amount of HPRP Funds Awarded To Subgrantee (s) / Contractor s(s)	Total
Financial Assistance	\$295,420.00		\$295,420.00
Housing Relocation and Stabilization	\$185,000.00		\$185,000.00
Data Collection and Evaluation	\$26,690.00		\$26,690.00
Administration	\$26,690.00		\$26,690.00
Total	\$533,800.00	\$0.00	\$533,800.00

HPRP Grant Amount	\$533,800
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Subgrantee/Contractor List Attachment

Document Type	Required?	Document Description	Date Attached
Subgrantee Attachment	Yes	Subgrantee List	10/07/2009






Attachment Details

Click on [“HPRP Subgrantee List Template”](#) on the left menu bar. Complete the spreadsheet, save it to your computer, and upload it to e-snaps using the [“Browse”](#) button. Excel and zip are the only file types allowed.

Document Description: Subgrantee List

Enter the total number of persons and households estimated to be served with HPRP Homelessness Prevention assistance and HPRP Homeless Assistance by the end of the grant period. For more instructions, click on "Instructions" on the left menu.

[illegible]

<p>    </p>	<p>  </p>	<p>  </p>
<p> </p>	<p> </p>	<p> </p>

Homelessness Prevention - Other Risk Factors to be Used

For Homelessness Prevention activities, in addition to HPRP eligibility requirements, are there other risk factors that will be used to determine eligibility and/or prioritization for homelessness prevention assistance? No

If yes, identify the criteria to be used and provide a brief description, including how the criteria will be used (e.g. limited to only certain types of HPRP assistance or applied across all subgrantees and types of assistance) and rationale for why the criteria were chosen (limit 2500 characters).

Data Collection Plan

Will beneficiary data be entered (or uploaded at least quarterly) into a single HMIS at the grantee level in order to generate unduplicated data for "Persons and Households Served" questions in the QPR? No

If yes, briefly describe the HMIS to be used and the plan to ensure data quality (completeness and accuracy)(limit 2000 characters).

If no, briefly describe the HMIS(s) and/or other comparable client-level database(s) that will be used by one or more subgrantees and the plan to ensure data quality (completeness and accuracy)(limit 2000 characters).

The Housing Corporation of Arlington, the subgrantee will be using SHORE HMIS and the data collected will then be forwarded to the Town of Arlington to generate unduplicated data for "persons and households served" questions in the QPR. To ensure data completeness and accuracy of data quality, the subgrantee will follow SHORE HMIS rules and regulations provided by DHCD.

Authorizing Information and Certification

The Name of the Authorized Grantee Official should be the same as submitted in the HPRP Substantial Amendment, unless there has been a change.

Name of Authorized Grantee Official Brian F. Sullivan

Title/Position Town Manager

I hereby certify that all the information stated herein is true and accurate. I understand that HUD will prosecute false claims and statements and that conviction may result in criminal and/or civil penalties (pursuant to 18 USC 1001, 1010, 1012; 31 USC 3729, 3802).

Check for Certification ☒

Summary

Part	Last Updated
Grantee State	No Input Required
Grantee Information	10/7/09 12:18 PM
Report Period and Status	10/1/09 12:42 PM
Persons and Households Served	10/5/09 12:41 PM
Housing Outcomes Homelessness Prevention	10/5/09 12:43 PM
Housing Outcomes Homeless Assistance	10/5/09 12:45 PM
Expenditures by Activity	10/5/09 12:46 PM
Grant Allocation	10/5/09 1:17 PM
Subgrantee/Contractor List Attachment	10/7/09 12:20 PM
Projected Persons and Households to be Served	10/7/09 12:26 PM
Homelessness Prevention Risk Factors	10/7/09 1:14 PM
Data Collection Plan	10/7/09 1:20 PM
Authorizing Information and Certification	10/7/09 11:20 AM